

FFDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

February 17, 2000

Leonard S. Miller, Treasurer American Council of Life Insurance, Life Insurance PAC 1001 Pennsylvania Avenue, NW Washington, DC 20004

Identification Number:

C00147066

Reference:

December Monthly Report (11/1/99-11/30/99)

Dear Mr. Miller:

This letter is to inform you that as of February 16, 2000, the Commission has not received your response to our request for additional information, dated January 27, 2000. This notice requests information essential to full public disclosure of your federal election campaign finances. To ensure compliance with the provisions of the Federal Election Campaign Act (the Act), please respond to this request (copy enclosed).

The Commission acknowledges that you have provided occupation and name of employer information in your 1999 Amended December Monthly Report dated January 14, 2000; however, you still need to address the excessive contribution referenced in our letter. If no response is received within fifteen (15) days from the date of this notice, the Commission may choose to initiate audit or legal enforcement action.

If you should have any questions regarding this matter, please contact Dominick Ciaraldi on our toll-free number (800) 424-9530 or our local number (202) 694-1130.

Sincerely,

John D. Gibson

Assistant Staff Director

Reports Analysis Division



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Leonard S. Miller, Treasurer
American Council of Life Insurance,
Life Insurance PAC
1001 Pennsylvania Avenue NW
Washington, DC 20004

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December Monthly Report (11/1/99-11/30/99)

Dear Mr. Miller:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee and its affiliates from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reauribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

-You must attempt to obtain the full name, mailing address, occupation and name of employer for all individuals who contribute more than \$200 in a calendar year. Please amend your report to include the omitted information.

A committee may establish "best efforts" by providing the Commission with a description of its procedures for requesting the information. It is also in the best interests of the committee to provide a copy of its solicitation. In order to establish "best efforts", the committee must demonstrate that it makes at least one request for the information after the contribution is received. This one request must be made for any solicited or unsolicited contribution that, in the aggregate, exceeds the \$200 threshold and lacks the necessary information.

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Each solicitation must include a clear and conspicuous request for the information. If a committee receives a contribution that, in the aggregate, exceeds the \$200 threshold but lacks contributor information, the committee must, within 30 days, make a written or oral request for the information. Please note that a written request may not include an additional solicitation or material on any other subject, other than thanking the contributor for the donation, and must include a pre-addressed return post card or envelope for the contributor's response. An oral request must be documented in writing. Committees must also disclose information that was not provided by the contributor, but is available in any of the committee's records for that current election cycle.

If a committee receives contributor information after the contributions have been reported, the committee shall either a) file with its next regularly

AMERICAN COUNCIL OF LIFE INSURANCE, LIFE INSURANCE PAC Page 3

scheduled report, an amended memo Schedule A listing all the contributions for which additional information was received; or b) file on or before its next regularly scheduled reporting date, amendments to the report(s) originally disclosing the contribution(s). (11 CFR §104.3(a)(4)(i) and 11 CFR § 104.7)

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,

Dominick Ciaraldi Reports Analyst

Reports Analysis Division

279

Use separate schedule(s) PAGE

SCHEDULE A	ITEMIZED RECEIPTS	for each rategory of the	1 <u>1</u>
Contributions From Other Political Committees (such as PACs)		Detailed Summary Page	FOR LINE NUMBER 11(c)
Any information copied from such Reports and Statements a purposes, other than using the name and address of any polit	pay not be sold or used by any person for the purpose of local committee to policit contributions from such come	of soliciting contributions or f miller.	er semenerial
NAME OF COMMITTEE (in Full) American Council of Life Insurance PAC			
Full Name, Mailing Address and ZIP Code RadiaStar Federal PAC P. O. Box 20 Minneapolis, MN 55440-0020	Name of Employer ReliaStar Federal PAC Outspection	Daw (month, day, year) 11/04/1999	Amount of Each Receipt this Faciod \$5,000.00
Resoipt Fer: Primary General Coher (specify):	Aggregate Year-to-Dato > 5,000.00	<u> </u>	
Full Name, Mailing Address and 7/P Code PrinPAC 711 High Street Des Moines, IA 50392	Name of Employer PrinPAC	Dete (month, day, year) 11/04/1999 11/11/1999	Amount of Each Receipt this Period \$2,500.00 \$2,500.00
Receipt For: Primary General Other /specifyl:	Occupation c/o Principal Financial Group Aggregate Year-to-Date > \$ 7,500.00	11/11/1939	21,500,00

SCHEDULE A

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Detailed Summary Page	FOR LINE	NUM

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NAME OF COMMITTER (in Full) American Council of Life Insurance PAC			· · ·
Full Name, Mailing Address and ZJP Code New York Life PAC 51 Madison Avenue New York, NY 10010	Name of Employer New York Life PAC	Data (morah, day, year) 3/30/1999	Amough of Each Receipt this Period \$5,000.00
Primary General	Compation	1	
exelpt Pox: Primary [] General [Other (specify):	Approprie Year-to-Date > 5,000.00	1	
iall Name, Mailing Address and ZIF Code Penn Mutual PAC Independence Square R2G Philadchphia, PA 19172-0001	Name of Employer Penn Mutual Life Insurance Company	Date (month, day, year) 3/23/1999	Amount of Each Receipt this Period \$5,000.00
	Occupation	1	
leasing For. Promotery Content	Aggregate Year-to-Date >5 5,000.00	1	
all Name, Mailing Address and ZIP Code DLLICO PAC 11 Massachusetts Avenue, NW Washington, DC 20001	Name of Employer Union Labor Life Insurance Company	Date (promit), day, year) 3/30/1999	(, year) Receipt this Period
	Осмерения	1	
aceipt Foct Primary General Other (specify):	Aggregata YasaMo-Date > \$ 3,000,00]	•
full Name, Mailing Address and Z:P Code Principal Financial Group PrinPAC 711 High Street	Name of Employer Principal Financial Group PrincAC	Date (month, day, year) 3/15/1999	Amount of Each Receipt this Period 52,500,00
Des Moines, IA 50392	Occupation	†	
Receipt For: Primary General Other (specify):	Aggregate Year-to-Dair > \$ 2,500,00	7	

SUBTOTAL of Receipts This Page (optional)	 \$ 15,500.00
TOTAL This Period (sed page this line number only)	 \$ 40,500.00

